

This portion MUST be returned with your payment to ensure proper credit. THANK YOU

ACCOUNT BILLED
LAND OF HEALTH, LC

PROJECT NAME
URSA MAJOR

PROJECT ID
S550017

DUE DATE	ANNUAL FEE
07/28/2006	\$ 150

AMOUNT DUE
\$ 150

<input type="checkbox"/> FEE NOT ENCLOSED
Request inspection to close permit (site/bond release application attached).

DIVISION OF OIL GAS AND MINING
1594 WEST NORTH TEMPLE SUITE 1210
PO BOX 145801
SALT LAKE CITY UT 84114-5801

<i>Change of Address</i>	
Contact	
Address	RECEIVED
	JUN 30 2006
E-Mail Address	DIV OF OIL, GAS & MINING
State	Zip
Phone	

Please make check payable to:
Division of Oil, Gas and Mining

UB